Delineation of Responsibilities for Children's Medical Services Branch, Regional Offices, and Dependent Counties as They Relate to the Healthy Families Memorandum of Understanding

County/City: Effective Dates:

Service	CCS Program Responsibilities	CMS Branch, Regional Offices, and Dependent County CCS Program Responsibilities
Liaison	Designate a liaison to the plan, who will be the program's point of contact for the health plan and its networks to coordinate all related activities.	Regional Office will designate a liaison as lead for their responsibilities as identified in the CCS case management procedure manual. Each dependent county will also designate a liaison to work with the plan.
	Meet, at a minimum, quarterly, to ensure ongoing communication; to resolve operational and administrative problems; and identify policy issues needing resolution at the management level.	CMS Branch staff, one representative from Regional Office and designated dependent county representative(s).
	Collaborate with plan to assist in the development of CCS related policies and procedures as needed by health plan and CCS.	Regional Office and dependent county CCS program (joint)
Provider Training	Collaborate with health plan to provide multiple initial training opportunities that will give providers an understanding of the CCS program and eligibility requirements.	Regional Office and dependent county CCS program (joint)
	Provide availability of local program medical consultant or designee to consult with primary care providers and/or specialty providers on a case-by-case basis.	Regional Office
<u> </u>	Support ongoing training opportunities as needed.	Regional Office and dependent county CCS program (joint)
CCS Provider Network	Provide plans with CCS provider applications to expedite the paneling or approval of specialty and primary care network providers.	Dependent county CCS program
	Coordinate with the state office to assure identification of local CCS provider network to health plan.	Dependent county CCS program
	Coordinate with plan to refer to an appropriate CCS-paneled specialty provider to complete diagnostic services and treatment as needed.	Regional Office and dependent county CCS program (joint)

County/City: Effective Dates:

Service	CCS Program Responsibilities	CMS Branch, Regional Offices, and Dependent County CCS Program Responsibilities
Case Identification and Referral	Provide technical assistance to plans for the development of plan policies, procedures, and protocols for making referrals to the program including necessary medical documentation.	Regional Office
	Determine medical eligibility within five working days of receiving adequate medical documentation of the suspicion of a CCS-eligible condition.	Regional Office
	Ensure that provider, designated plan personnel, and subscriber family are informed of either program eligibility or denial upon eligibility determination.	Regional Office and dependent county CCS program (joint), as per CCS Case Management Procedure manual
	Provide medical consultation as appropriate during the time period from referral to medical eligibility determination.	Regional Office
	Authorize, from referral date, medically necessary CCS benefits required to treat a subscriber's CCS-eligible condition and be responsible for the reimbursement of care to authorized providers when CCS eligibility is established.	Regional Office
	Coordinate with plan liaison and network designees to share a tracking list of CCS eligibles who are known to the plans. The list will include name, CCS case number, DOB, SSN (if known), CCS eligible diagnoses, date of eligibility, and status; in case of denial or closure, reason for ineligibility and date closed; referral source and primary care provider on file, if known.	CMS Branch
Case Management/Tracking and Follow-Up	 Assist plan in assessing and alleviating barriers to accessing primary and specialty care related to the CCS-eligible condition. Assist subscriber/subscriber family to complete enrollment into the CCS program. 	Regional Office and dependent county CCS program (joint)
	Provide case management services in order to coordinate the delivery of health care services to subscribers with CCS-eligible conditions, including services provided by other agencies and programs, such as Local Education Agencies and Regional Centers.	Regional Office and dependent county CCS program (joint)
	Develop systems that will result in transmission of medical reports of services provided by CCS-authorized providers to the appropriate plan primary care providers.	Regional Office

County/City: Effective Dates:

		CMS Branch, Regional Offices, and Dependent	
Service	CCS Program Responsibilities	County CCS Program Responsibilities	
Quality Assurance and Monitoring	Conduct, jointly with the plans, regular reviews of policies and procedures related to this agreement.	CMS Branch and designated dependent county representative (joint) with CMS Branch as lead	
	Participate, at a minimum, in quarterly meetings with the plans to update policies and procedures as appropriate	CMS Branch and designated dependent county representative (joint) with CMS Branch as lead.	
	Review and update protocol on an annual basis in conjunction with the health plan.	CMS Branch and designated dependent county representative (joint) with CMS Branch as lead.	
	Develop work plan in conjunction with the plans that will monitor the effectiveness of the MOU and the plan/CCS interface.	CMS Branch and designated dependent county representative (joint) with CMS Branch as lead.	
Problem Resolution	 Assign appropriate CCS program management and professional/liaison staff to participate with health plan management staff in the resolution of individual subscriber issues, as they are identified. 	Regional Office	
	 Assign appropriate CCS program/liaison staff to participate in, at a minimum, quarterly meetings with health plan management/liaison staff to identify and resolve operational and administrative issues, including coordination, communication, referral, training, billing, provision of appropriate services and authorization of services. 	Regional Office will refer to CMS Branch, Program Standards, and Quality Assurance Section if issue cannot be resolved.	
	Refer issue to CMS Regional Office if problem cannot be resolved locally.	Regional Office will refer to CMS Branch, Program Standards, and Quality Assurance Section if issue cannot be resolved.	

Signatures of the undersigned indicate intent to develop policies and procedures that will successfully develop the local CCS and Healthy Families Program interface.

County CCS Administrator	Date
Plan Designee	Date
Maridee A. Gregory, MD, Children's Medical Services Branch Chief	Date